

Work Order ID 87960

July-20-12 8:57:35 AM

\*87960\*

PRELIMINARY ISSUE

Page 1

Item ID: D4500-1

Revision ID: U/R

Item Name: Bell Door Header

Start Date: 7/20/12

Start Qty: 5.00

\*5\*

Required Date: 8/24/12

Req'd Qty: 5.00

\*5\*

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

D4500

PB2

100

0.00

\*100\*

Bandsaw

Jeaspa Bandsaw

Memo

CUT BLANK 25.00" LONG

110

0.00

\*110\*

Purchasing

Purchasing

Memo

ISSUE P/O: 17497  
TO ARCHUR PRECISION (GLOBUS)  
C OF C IS REQUIRED

120

0.00

\*120\*

QC

Quality Control

Memo

QC6- Inspect dimensions to drawing

Door

split

U

15

13.1.8

PB2

7/12/07-20

2

CK 12/08/07.5

P/O: 18357 CK 12/11/07  
x4

Wejag Machine Products

12/10/07

DA

12/10/07

Inspects to PB2

Hand changed Day

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  _____ _____ _____		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____

Work Order ID 87960

\*87960\*

Page 2

July-20-12 8:57:35 AM

Item ID: D4500-1

Accept

\*N9000040100\*

Setup Start

\*NS1\*

Revision ID: U/R

Stop

\*NS2\*

Item Name: Bell Door Header

Start Date: 7/20/12 Start Qty: 5.00

\*5\*

Cust Item ID:

Required Date: 8/24/12 Req'd Qty: 5.00

\*5\*

Customer:

Reference:

Run

Start

\*NR1\*

Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop

\*NR2\*

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

Chemical Conversion Coat per QSI005 4.1

0.00

\*130\*

HandFinish

Memo

0.00

Hand Finishing

140

QC7-Inspect Chemical Conversion Coat

0.00

\*140\*

QC

Memo

0.00

Quality Control

# 150 PRIME PART according to QSI 005 4.2.1.3.2  
temp grey 4500PB-4013

200

Identify as per dwg & Stock Location:

0.00

\*200\*

Packaging

Memo

0.00

Packaging

151 - QC 3 inspect Prime

DAS 15 12/12/03

(+3)

4 7/12-9/12

4

4 0 0 12-12-2

(1) 1209-07



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

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Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



Work Order ID 87960

\*87960\*

Page 3

July-20-12 8:57:35 AM

Item ID: D4500-1

Accept

\*N9000040100\*

Setup Start \*NS1\*

Revision ID: U/R

Stop \*NS2\*

Item Name: Bell Door Header

Start Date: 7/20/12 Start Qty: 5.00 \*5\*

Cust Item ID:

Required Date: 8/24/12 Req'd Qty: 5.00 \*5\*

Customer:

Reference:

Run Start \*NR1\*

Approvals: Process Plan: Date: Tooling: Date:

Stop \*NR2\*

QC: Date: SPC (Y/N): Date:

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID Tool # Plan Accept Reject Reject Insp.  
Code Qty Qty Number Stamp

210

QC21- Final Inspection - Work Order Release

0.00

\*210\*

QC

Memo

0.00

Quality Control

POSITIVE RECALL  
EFFECTIVE 2012-10-10 AUTH W  
RELEASED 5 DATE 13/03/26  
Rec C

13-1-17

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
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# Picklist Print

July-20-12 8:57:34 AM

Page 1

Work Order ID: 87960  
 Parent Item: D4500-1  
 Parent Item Name: Bell Door Header

Start Date: 7/20/12  
 Start Qty: 5.00

Required Date: 8/24/12  
 Required Qty: 5.00

Comments: IPP revA 12.07.18 new issue EC verified by:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M6061T6B2.000X08.000 6061-T6 BAR 2.00' X 8.00"		Purchased	No			100	f	10.3350	2.01	10.578947			

Location	Loc Qty	Loc Code
MAT005	10.335	
121626	10.335	

122605 x 3PCS

2x Jw/12-07-20  
 3x Jw/12-08-07



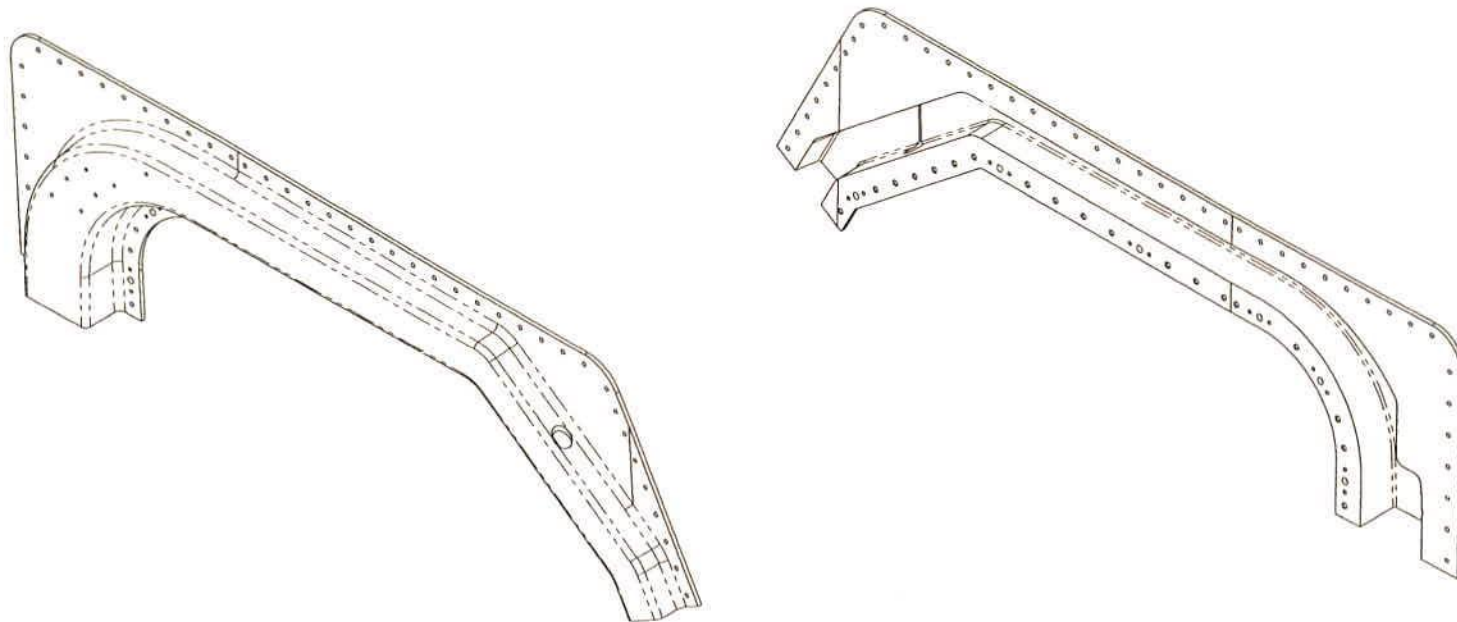
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  _____ _____ _____		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____



**D4500-1 BELL DOOR HEADER**

**NOTES:**

- 1) MATERIAL: 6061-T6/T651/T6510/T6511/T62 ALUMINUM BAR  
PER QQ-A-225/8 OR AMS-QQ-A-225/8  
(OR AMS 4117/4128/4115/4116)  
OR QQ-A-200/8 OR AMS-QQ-A-200/8 (OR AMS 4160)  
OR ASTM B211 OR ASTM B221  
REF DART SPEC M6061T6B
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 1.83 lbs
- 8) RAW MATERIAL SURFACE FINISH SUFFICIENT FOR THIS PART  
(NOT NECESSARY TO FACE MATERIAL).
- 9) ALL NON DIMENSIONED FEATURES PER CAD FILE "D4500-1-REVPB2.STP"

**PRELIMINARY B2**  
12.07.19 (AJS)

*2/1087960*

PB2	FLANGE REDUCED, RIVET HOLES REPITCHED.	AJS	12.07.19
PB1	COMPLETE REDESIGN.	AJS	12.06.25
A	NEW ISSUE	AJS	12.03.02
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED		DRAWING NO.	REV. PB2
MFG. APPR.		D4500	SHEET 1 OF 4
APPROVED		TITLE	SCALE
DE APPR.		BELL DOOR HEADER	NTS
DATE	12.07.19	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD  THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL. RIGHTS RESERVED ON THE EXPRESS CONDITION THAT IT IS  NOT TO BE LOANED, REPRODUCED, COPIED, OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL,  INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM.</small>	

NCR: Yes / No

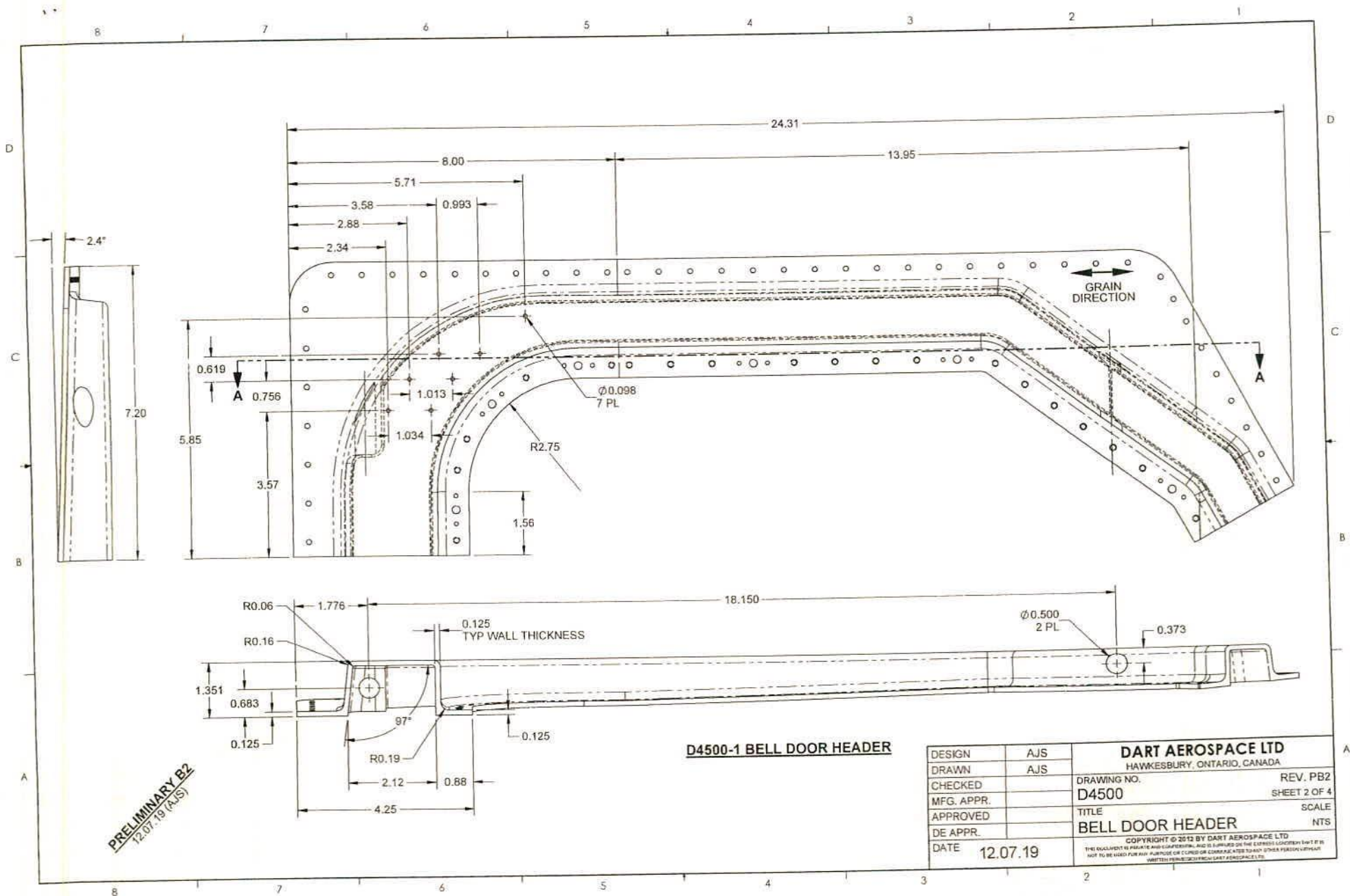
**WORK ORDER NON-CONFORMANCE / UPDATE**

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**PRELIMINARY B2**  
12.07.19 (AJS)

**D4500-1 BELL DOOR HEADER**

DESIGN	AJS	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED		DRAWING NO.	REV. PB2
MFG. APPR.		D4500	SHEET 2 OF 4
APPROVED		TITLE	SCALE
DE APPR.		BELL DOOR HEADER	NTS
DATE	12.07.19	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS EQUIPMENT IS PROPRIETARY AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMPARABLE AFTER THOUGHT OTHER THAN THAT FOR WHICH IT WAS DESIGNED. UNLESS OTHERWISE SPECIFIED BY DART AEROSPACE LTD.	

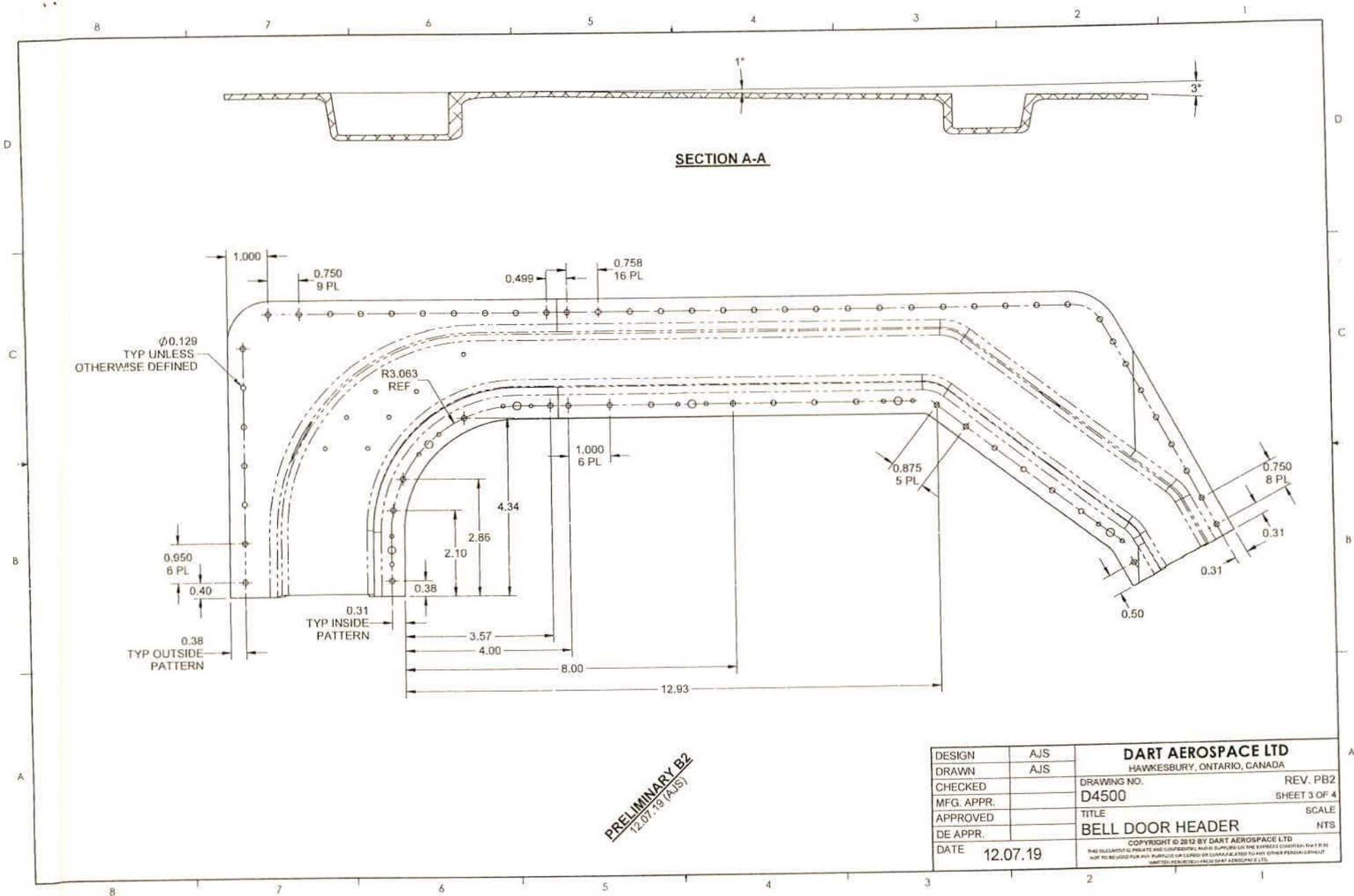
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		



**PRELIMINARY B2**  
12.07.19 (AJS)

DESIGN	AJS	<b>DART AEROSPACE LTD</b>	
DRAWN	AJS	HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. PB2
MFG. APPR.		<b>D4500</b>	SHEET 3 OF 4
APPROVED		TITLE	SCALE
DE APPR.		<b>BELL DOOR HEADER</b>	NTS
DATE	12.07.19	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRELIMINARY AND CONFIDENTIAL. NO PART OF THIS DOCUMENT IS TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS WITHOUT THE WRITTEN PERMISSION OF DART AEROSPACE LTD.</small>	



NCR: Yes / No

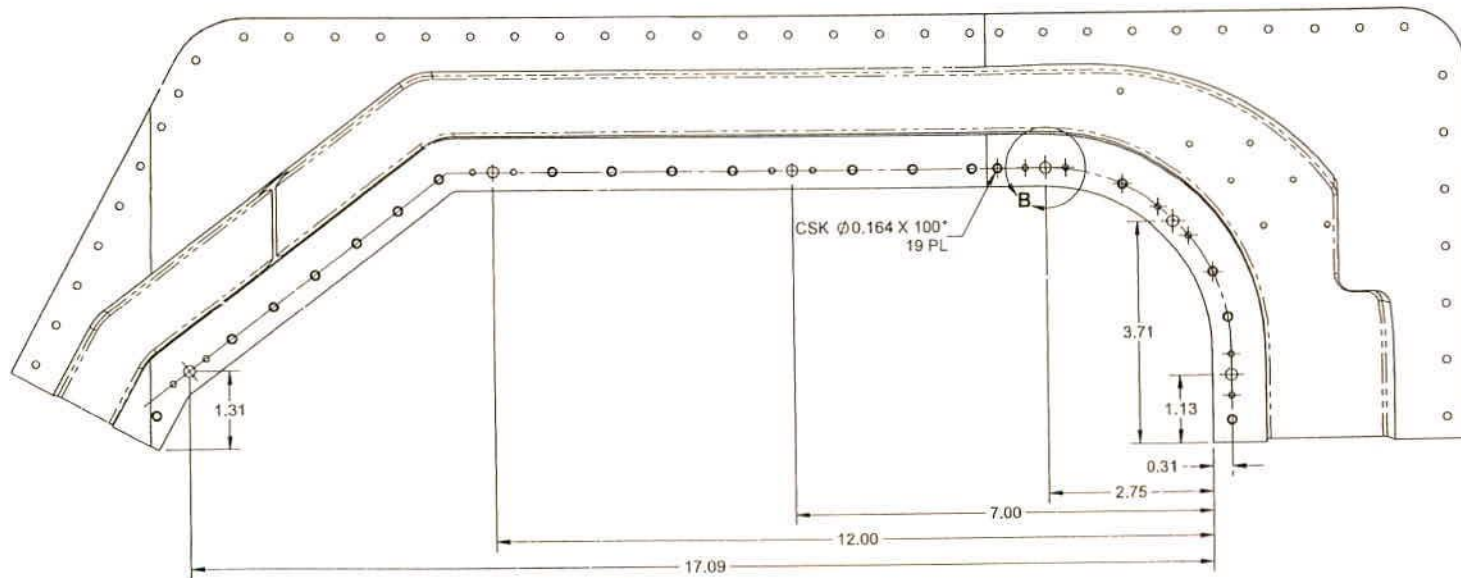
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

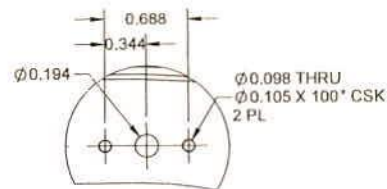
Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



(SUPPLEMENTAL VIEW  
NUTPLATE LOCATIONS)

**PRELIMINARY B2**  
12.07.19 (AJS)



**DETAIL B**  
NUTPLATE HOLE DETAIL 6 PL  
SCALE 2X

DESIGN	AJS	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED		DRAWING NO.	REV. PB2
MFG. APPR.		D4500	SHEET 4 OF 4
APPROVED		TITLE	SCALE
DE APPR.		<b>BELL DOOR HEADER</b>	NTS
DATE	12.07.19	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, WITHOUT PERMISSION IN WRITING FROM DART AEROSPACE LTD.</small>	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		





600 O'CONNOR DRIVE, KINGSTON, ONTARIO K7G 1G9  
TEL: 613-384-1662 FAX: 613-384-1663  
WWW.WEJAY.COM

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INVOICE DATE		YOUR ORDER NO.		DATE C.		SHIPPED VIA	
CUSTOMER CODE		PROV. LIC. NO.		Extra <input type="checkbox"/> Exempt <input type="checkbox"/>		TERMS	
QUANTITY ORDERED	B.O.	QUANTITY SHIPPED	DESCRIPTION				UNIT PRICE
	0	5					
<p><b>RELEASE NOTE</b></p> <p>I certify that the items listed hereof have been inspected and tested and conform to all specifications and requirements in the contract or purchase order.</p> <p>Inspection Supervisor <u>[Signature]</u> <b>WMP CS</b></p> <p><b>AUG. 17, 2012</b></p>							

SP 12-8-22

ORDER: COMPLETE ☐ PARTIAL ☐

**TOTAL**

NO GOODS RETURNED  
PRIOR AUTHORIZATION

RECEIVED BY \_\_\_\_\_  
1.5% PER MONTH (18% PER ANNUM)  
CHARGED ON OVERDUE ACCOUNTS

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  _____ _____ _____	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____



600 O'CONNOR DRIVE, KINGSTON, ONTARIO K7P 1N3

PHONE: (613) 384-1662

FAX: (613) 384-2997

## CERTIFICATE OF COMPLIANCE

CUSTOMER: Dart Aerospace Ltd.

DATE: Aug. 17, 2012

P.O.# P017497

WEJAY JOB# 35834

I hereby certify that the following material has been inspected/tested and conforms to the requirements and specifications as stated in your contract and as noted below. Any exceptions will be listed as NCR items.

PART NO.	QTY.	PROCESS (ES)	SPECIFICATION / REV
D4500 'Bell Door Header'	4	Machined complete per drawing req'ts	D4500 / rev. PB2
D4500 'Bell Door Header'	1	Machined complete per drawing req'ts except as per NCR 0101.	D4500 / rev. PB2

Note: 1) Material supplied by 'Dart Aerospace'  
2) Inspection Test Report attached for 1st article.  
3) NCR 0101 attached.

Records of Inspection/Test will be retained for 5 years minimum.

Yours truly,

**Clifford Smith**

Authorized Q.A. Signatory



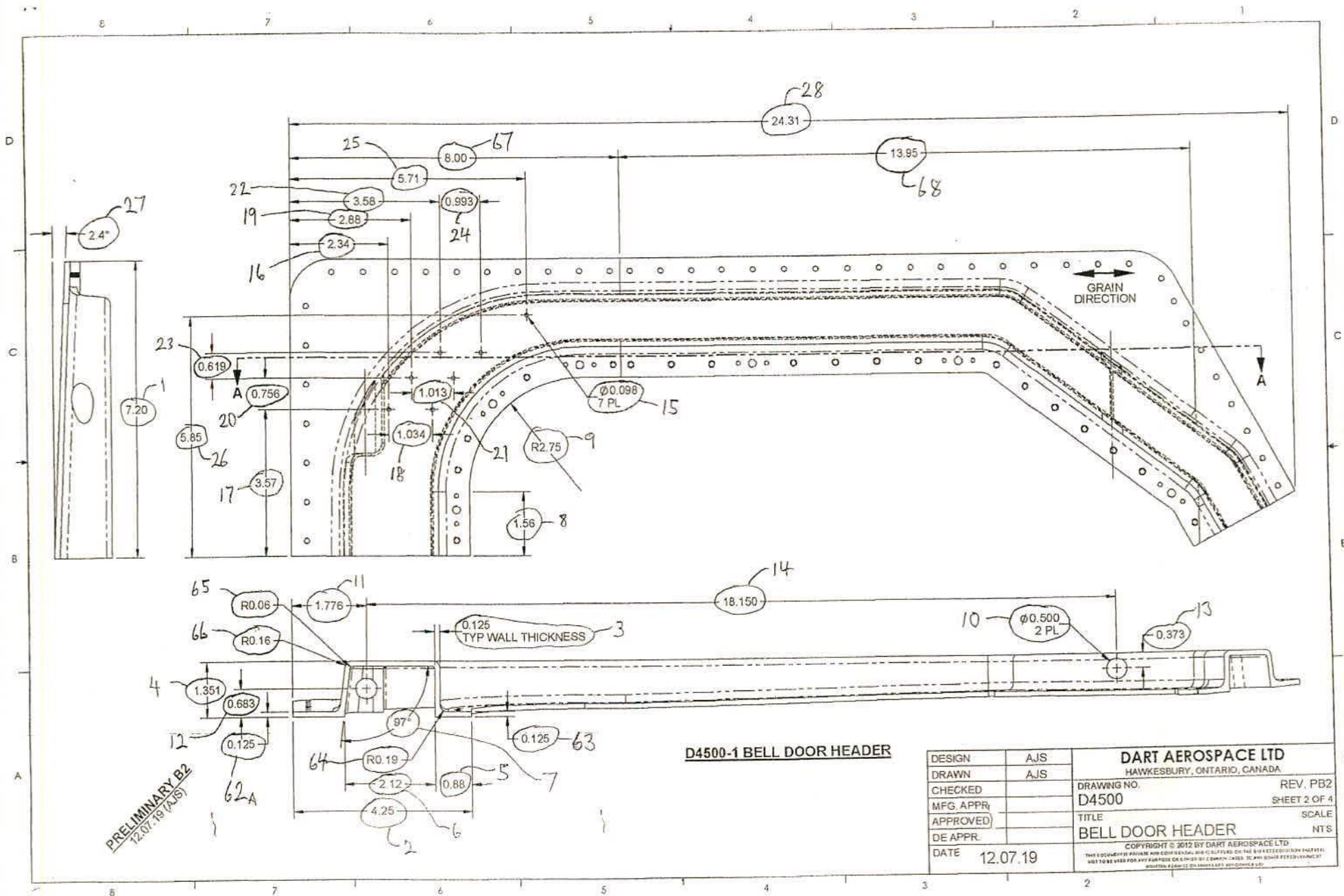
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>			
Doc/Data												
Equip/Tooling												
Operator												
Material												
Setup												
Other												
Process												
Supplier												
Training												
Unapproved												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <hr/> <hr/> <hr/>		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other  <hr/> <hr/> <hr/>	



DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS	DRAWING NO. D4500	REV. PB2
CHECKED			SHEET 2 OF 4
MFG APPR		TITLE BELL DOOR HEADER	SCALE NTS
APPROVED		COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE BASIS OF EXCLUSIVE AGREEMENT NOT TO BE USED FOR ANY PURPOSES OUTSIDE OF THE SCOPE OF THE EXCLUSIVE AGREEMENT SOLUTION & SERVICE DIVISION DART AEROSPACE LTD	
DE APPR			
DATE	12.07.19		

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other





NCR: Yes / No

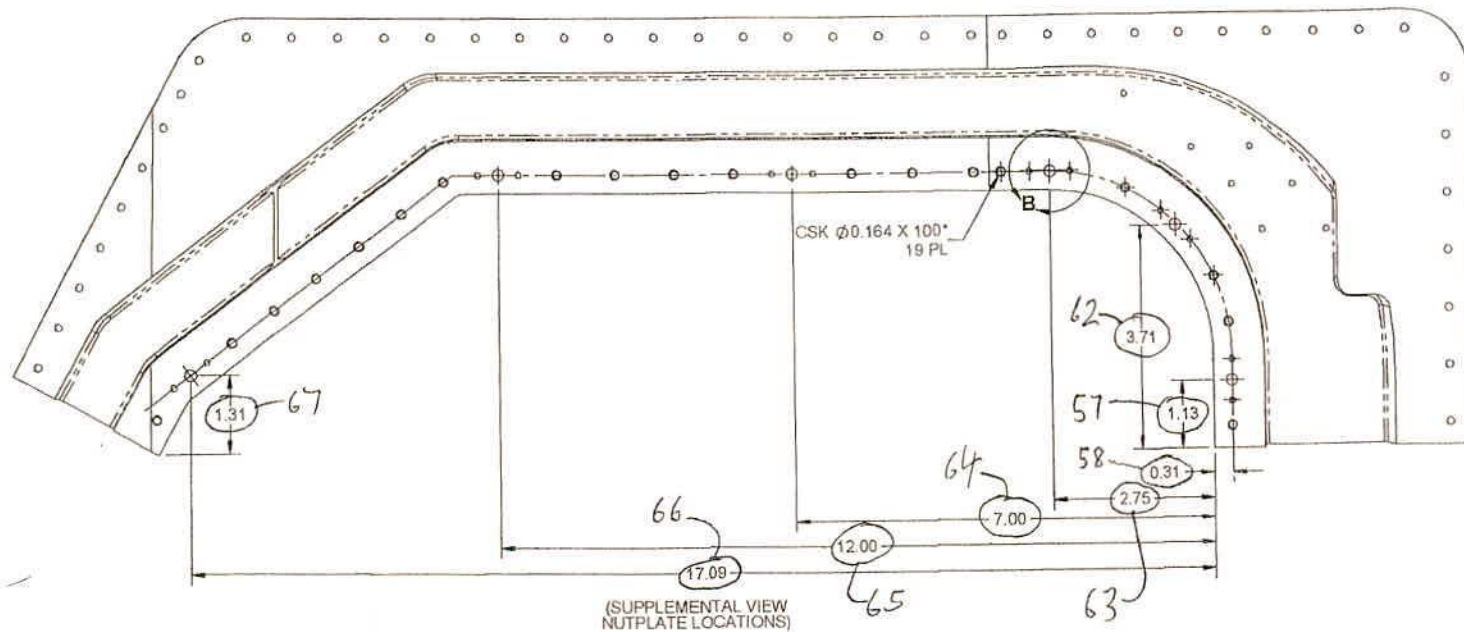
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

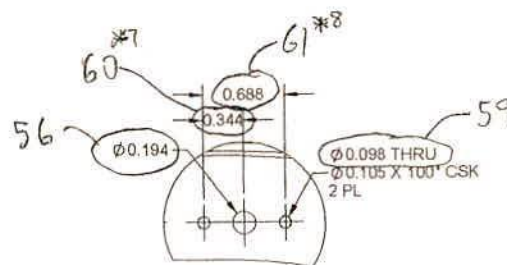
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



(SUPPLEMENTAL VIEW  
NUTPLATE LOCATIONS)



**DETAIL B**  
NUTPLATE HOLE DETAIL 6 PL  
SCALE 2X

**PRELIMINARY B2**  
12.07.19 (AJS)

DESIGN	AJS	<b>DART AEROSPACE LTD</b>	
DRAWN	AJS	HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. PB2
MFG. APPR.		D4500	SHEET 4 OF 4
APPROVED		TITLE	SCALE
DE APPR.		BELL DOOR HEADER	NTS
DATE	12.07.19	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD ALL RIGHTS RESERVED. PHOTO AND OTHER DOCUMENTS ARE THE PROPERTY OF DART AEROSPACE LTD. NO PART OF THIS DOCUMENT MAY BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS WITHOUT THE WRITTEN PERMISSION OF DART AEROSPACE LTD.</small>	



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  _____ _____ _____	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____

CUSTOMER: Dart Aerospace Ltd.

P.O. No. P01749	DWG No. D4500	REV. PB2	DESCRIPTION: Bell Door Header	QTY. REC. 5	QTY. REJ. 1	JOB/BATCH No. 35834	TRACECODE: Customer supplied material	PAGE: 1 of 2
PART No. D4500			RESPONSIBILITY: --	LOCATION: Wejay Insp. -Hold		NONCONF. OP. No. --	LAST COMPLETE OP. No. Parts complete	

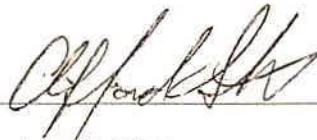
DESCRIPTION OF NONCONFORMANCE		
Item	Qty	
1	1	0.125 section thickness is undersize on all of inner side wall only. Actual size is .095/.098". All other wall sections O.K. to dwg size.

DISPOSITION PROPOSAL	
Item Ref.	
1	Not reworkable. Customer disposition required.

MFG. SIGNATURE:



INSPECTOR:



DATE: Aug. 17, 2012

DATE: Aug. 17, 2012

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

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Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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FAULT CATEGORY				
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CUSTOMER: Dart Aerospace Ltd.

P.O. No. PO17497	DWG No. D4500	REV. PB2	DESCRIPTION: Bell Door Header	QTY. REC. 5	QTY. REJ. 1	JOB/BATCH No. 35834	TRACECODE: Customer supplied material	PAGE 2 of 2
PART No. D4500		RESPONSIBILITY: --		LOCATION: Wejay Insp. -Hold		NONCONF. OP. No. --		LAST COMPLETE OP. No. Parts complete

ISSUED TO: Ed Jansen		Department: Production	
Note: To be completed & returned to Quality Assurance within 5 working days.			
<b>CAUSE OF NONCONFORMANCE</b>			
Item Ref.			
1	1st off part- discrepancy due to programming error.		
<b>CORRECTIVE ACTION</b>			
Item Ref.			
1	Programming error corrected prior to machining 2nd piece and found acceptable		
<b>CUSTOMER DISPOSITION</b>			
Item Ref.			
1	ACCEPTED 'AS-IS' BY DART <i>[Signature]</i> AUG. 20/12 (SEE ATTACHED E-MAIL)		

*DAN  
17/08/12*

CORRECTIVE ACTION		FOLLOWUP: CORRECTIVE ACTION HAS BEEN IMPLEMENTED AND VERIFIED AS EFFECTIVE.	
ACCEPTED: <input checked="" type="checkbox"/> NOT ACCEPTED: <input type="checkbox"/>			
Q.A. MANAGER:	DATE:	Q.A. MANAGER:	DATE:
<i>[Signature]</i>	Aug. 17, 2012	<i>[Signature]</i>	Aug. 17, 2012

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

## Clifford Smith

**From:** Scott Dennis [scott@wejay.com]  
**Sent:** Monday, August 20, 2012 12:52 PM  
**To:** Jean-Luc Menard  
**Cc:** Clifford Smith  
**Subject:** Re: NCR

Thank you for the information.

Scott

**From:** [redacted]  
**Sent:** Monday, August 20, 2012 12:37 PM  
**To:** [redacted]  
**Cc:** [redacted]  
**Subject:** RE: NCR

Just make sure the part will be acceptable, just make sure to identify it pls.

**From:** Scott Dennis [mailto:scott@wejay.com]  
**Sent:** Friday, August 17, 2012 11:46 AM  
**To:** Jean-Luc Menard  
**Cc:** Rick Jansen  
**Subject:** NCR

Hi Jean-Luc:

As I was saying on the phone I have a non conformance for you to look at. I have attached a copy of the NCR as well as a picture for clarification.

Thank you

Scott Dennis  
Wejay Machine Products Co. Ltd.  
613-384-1662



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Doc/Data											
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FAULT CATEGORY				
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Customer Dart Aerospace Ltd. Customer P.O. P017497  
 Drawing # D4500 Drawing rev PB2  
 Part Number D4500 E.C.O. -  
 Part Name Bell Door Header Material Alum. Alloy 6061-T6511  
 Serial # 002 Inspected by Cliff Smith  
 Job # 35834 Signature: 



## Overall Result

All Characteristics:

293

Out of tolerance:

0

Over Warning Limit:

0

Not Calculated:

0

Comment: ACCEPTED

Feature	ID	Actual	Nominal	Pos Tol.	Neg Tol.	Deviation	<- ->
1 2_C8	Y	-7.1960	-7.2000	0.0300	-0.0300	0.0040	-
Inside bott. face_flat	GDT Flat	0.0021	0.0000	0.0100		0.0021	-
2 2_A6	X	-4.2432	-4.2500	0.0300	-0.0300	0.0068	-
4 2_A7	Z	1.3473	1.3510	0.0100	-0.0100	-0.0037	-
5 2_A6_X	Dist	0.8793	0.8800	0.0300	-0.0300	-0.0007	-
6 2_A6_X	Dist	2.1209	2.1200	0.0300	-0.0300	0.0009	-
7 2_A6	A	97.0217	97.0000	0.5000	-0.5000	0.0217	-
8 2_B5_Y	Dist	1.5606	1.5600	0.0300	-0.0300	0.0006	-
9 2_C5	R	2.7509	2.7500	0.0300	-0.0300	0.0009	-
10a 2_B2	D	0.5006	0.5000	0.0060	-0.0010	0.0006	-
10b 2_B2	D	0.5005	0.5000	0.0060	-0.0010	0.0005	-
11 2_B7	X	-1.7760	-1.7760	0.0100	-0.0100	0.0000	-
12 2_A7	Z	-0.6778	-0.6830	0.0100	-0.0100	0.0052	-
13 2_B1	Z	0.3732	0.3730	0.0100	-0.0100	0.0002	-
14 2_B4	X	-18.1492	-18.1500	0.0100	-0.0100	0.0008	-
15a 2_C5	D	0.0986	0.0980	0.0040	-0.0010	0.0006	-
16 2_C7	X	-2.3387	-2.3400	0.0300	-0.0300	0.0013	-
17a 2_B7	Y	3.5717	3.5700	0.0300	-0.0300	0.0017	-
15b 2_C5	D	0.0986	0.0980	0.0040	-0.0010	0.0006	-
17b 2_B7	Y	3.5713	3.5700	0.0300	-0.0300	0.0013	-
18 2_C6_X	Dist	1.0344	1.0340	0.0100	-0.0100	0.0004	-
15c 2_C5	D	0.0985	0.0980	0.0040	-0.0010	0.0005	-
19 2_D7	X	-2.8801	-2.8800	0.0300	-0.0300	-0.0001	-
20a 2_C7_Y	Dist	0.7562	0.7560	0.0100	-0.0100	0.0002	-
15d 2_C5	D	0.0986	0.0980	0.0040	-0.0010	0.0006	-
20b 2_C7_Y	Dist	0.7558	0.7560	0.0100	-0.0100	-0.0002	-
21 2_C6_X	Dist	1.0133	1.0130	0.0100	-0.0100	0.0003	-
15e 2_C5	D	0.0986	0.0980	0.0040	-0.0010	0.0006	-
22 2_D6	X	-3.5744	-3.5800	0.0300	-0.0300	0.0056	-
23a 2_C7_Y	Dist	0.6185	0.6190	0.0100	-0.0100	-0.0005	-
15f 2_C5	D	0.0986	0.0980	0.0040	-0.0010	0.0006	-
23b 2_C7_Y	Dist	0.6182	0.6190	0.0100	-0.0100	-0.0008	-

NCR: Yes / No

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Feature	ID	Actual	Nominal	pos Tol	neg Tol	Diff	<-- -->
24 2_D6_X	Dist	0.9928	0.9930	0.0100	-0.0100	-0.0002	-
15g 2_C5	D	0.0986	0.0980	0.0040	-0.0010	0.0006	-
25 2_D6	X	-5.7094	-5.7100	0.0300	-0.0300	0.0006	-
26 2_C7	Y	5.8455	5.8500	0.0300	-0.0300	-0.0045	-
27 2_D8	A2	2.3664	2.4000	0.5000	-0.5000	-0.0336	-
28 2_D4	X	-24.3058	-24.3062	0.0300	-0.0300	0.0004	-
29 3_D4	A1	-1.0452	-1.0000	0.5000	-0.5000	-0.0452	-
30 3_D1	A1	-3.8838	-3.7000	0.5000	-0.5000	-0.1838	-
31a 3_C8	D	0.1289	0.1290	0.0050	-0.0010	-0.0001	-
32a 3_B7	X	-0.3712	-0.3800	0.0300	-0.0300	0.0088	-
33a 3_B7	Y	0.3748	0.3725	0.0300	-0.0300	0.0023	-
31b 3_C8(1)	D	0.1286	0.1285	0.0050	-0.0010	0.0001	-
31b 3_C8(2)	D	0.1286	0.1285	0.0050	-0.0010	0.0001	-
31b 3_C8(3)	D	0.1286	0.1285	0.0050	-0.0010	0.0001	-
31b 3_C8(4)	D	0.1287	0.1285	0.0050	-0.0010	0.0002	-
31b 3_C8(5)	D	0.1286	0.1285	0.0050	-0.0010	0.0001	-
31b 3_C8(6)	D	0.1286	0.1285	0.0050	-0.0010	0.0001	-
32b 3_B7(1)	X	-0.3716	-0.3750	0.0300	-0.0300	0.0034	-
32b 3_B7(2)	X	-0.3721	-0.3750	0.0300	-0.0300	0.0029	-
32b 3_B7(3)	X	-0.3726	-0.3750	0.0300	-0.0300	0.0024	-
32b 3_B7(4)	X	-0.3731	-0.3750	0.0300	-0.0300	0.0018	-
32b 3_B7(5)	X	-0.3736	-0.3750	0.0300	-0.0300	0.0014	-
32b 3_B7(6)	X	-0.3739	-0.3750	0.0300	-0.0300	0.0011	-
33b 3_B7(1)	Y	0.9474	0.9500	0.0300	-0.0300	-0.0026	-
33b 3_B7(2)	Y	1.8973	1.9000	0.0300	-0.0300	-0.0027	-
33b 3_B7(3)	Y	2.8472	2.8500	0.0300	-0.0300	-0.0028	-
33b 3_B7(4)	Y	3.7971	3.8000	0.0300	-0.0300	-0.0029	-
33b 3_B7(5)	Y	4.7470	4.7500	0.0300	-0.0300	-0.0030	-
33b 3_B7(6)	Y	5.6969	5.7000	0.0300	-0.0300	-0.0031	-
31c 3_C8	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	-
35 3_C7	X	-0.9990	-1.0000	0.0100	-0.0100	0.0010	-
36a 3_B1	Y	-0.3061	-0.3100	0.0300	-0.0300	0.0039	-
31d 3_C8(1)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	-
31d 3_C8(2)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	-
31d 3_C8(3)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	-
31d 3_C8(4)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	-
31d 3_C8(5)	D	0.1285	0.1290	0.0050	-0.0010	-0.0005	-
31d 3_C8(6)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	-
31d 3_C8(7)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	-
31d 3_C8(8)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	-
31d 3_C8(9)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	-
37 3_C7(1)	X	-0.7502	-0.7500	0.0010	-0.0010	-0.0002	-
37 3_C7(2)	X	-1.5002	-1.5000	0.0010	-0.0010	-0.0002	-
37 3_C7(3)	X	-2.2501	-2.2500	0.0010	-0.0010	-0.0001	-
37 3_C7(4)	X	-3.0001	-3.0000	0.0010	-0.0010	-0.0001	-

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



Feature	ID	Actual	Nominal	pos Tol	neg Tol	Diff	<-- -->
37 3_C7(5)	X	-3.7499	-3.7500	0.0010	-0.0010	0.0001	-
37 3_C7(6)	X	-4.4997	-4.5000	0.0010	-0.0010	0.0003	-
37 3_C7(7)	X	-5.2496	-5.2500	0.0010	-0.0010	0.0004	-
37 3_C7(8)	X	-5.9996	-6.0000	0.0010	-0.0010	0.0004	-
37 3_C7(9)	X	-6.7495	-6.7500	0.0010	-0.0010	0.0005	-
36b 3_B1(1)	Y	-0.3072	-0.3100	0.0300	-0.0300	0.0028	-
36b 3_B1(2)	Y	-0.3081	-0.3105	0.0300	-0.0300	0.0024	-
36b 3_B1(3)	Y	-0.3091	-0.3111	0.0300	-0.0300	0.0020	-
36b 3_B1(4)	Y	-0.3100	-0.3116	0.0300	-0.0300	0.0016	-
36b 3_B1(5)	Y	-0.3108	-0.3122	0.0300	-0.0300	0.0014	-
36b 3_B1(6)	Y	-0.3117	-0.3127	0.0300	-0.0300	0.0010	-
36b 3_B1(7)	Y	-0.3125	-0.3133	0.0300	-0.0300	0.0008	-
36b 3_B1(8)	Y	-0.3133	-0.3138	0.0300	-0.0300	0.0005	-
36b 3_B1(9)	Y	-0.3142	-0.3144	0.0300	-0.0300	0.0002	-
31e 3_C8	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
38 3_C5	X	-0.5000	-0.4990	0.0100	-0.0100	-0.0010	-
36c 3_B1	Y	-0.3145	-0.3100	0.0300	-0.0300	-0.0045	-
31f 3_C8(1)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31f 3_C8(2)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31f 3_C8(3)	D	0.1285	0.1290	0.0050	-0.0010	-0.0005	—
31f 3_C8(4)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31f 3_C8(5)	D	0.1288	0.1290	0.0050	-0.0010	-0.0002	—
31f 3_C8(6)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31f 3_C8(7)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31f 3_C8(8)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31f 3_C8(9)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31f 3_C8(10)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31f 3_C8(11)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31f 3_C8(12)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31f 3_C8(13)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31f 3_C8(14)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31f 3_C8(15)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31f 3_C8(16)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
36d 3_B1(1)	Y	-0.3146	-0.3150	0.0300	-0.0300	0.0004	-
36d 3_B1(2)	Y	-0.3148	-0.3155	0.0300	-0.0300	0.0007	-
36d 3_B1(3)	Y	-0.3149	-0.3160	0.0300	-0.0300	0.0011	-
36d 3_B1(4)	Y	-0.3150	-0.3164	0.0300	-0.0300	0.0014	-
36d 3_B1(5)	Y	-0.3151	-0.3169	0.0300	-0.0300	0.0018	-
36d 3_B1(6)	Y	-0.3153	-0.3174	0.0300	-0.0300	0.0021	-
36d 3_B1(7)	Y	-0.3153	-0.3179	0.0300	-0.0300	0.0026	-
36d 3_B1(8)	Y	-0.3153	-0.3183	0.0300	-0.0300	0.0030	-
36d 3_B1(9)	Y	-0.3153	-0.3188	0.0300	-0.0300	0.0035	-
36d 3_B1(10)	Y	-0.3152	-0.3193	0.0300	-0.0300	0.0040	-
36d 3_B1(11)	Y	-0.3152	-0.3198	0.0300	-0.0300	0.0046	-
36d 3_B1(12)	Y	-0.3150	-0.3202	0.0300	-0.0300	0.0052	-



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		



Feature	ID	Actual	Nominal	pos Tol	neg Tol	Diff	<-- -->
36d 3_B1(13)	Y	-0.3148	-0.3207	0.0300	-0.0300	0.0059	-
36d 3_B1(14)	Y	-0.3146	-0.3212	0.0300	-0.0300	0.0066	-
36d 3_B1(15)	Y	-0.3141	-0.3217	0.0300	-0.0300	0.0075	-
36d 3_B1(16)	Y	-0.3138	-0.3221	0.0300	-0.0300	0.0083	-
39 3_C5(1)	X	-0.7598	-0.7602	0.0100	-0.0100	0.0004	-
39 3_C5(2)	X	-1.5198	-1.5204	0.0100	-0.0100	0.0006	-
39 3_C5(3)	X	-2.2797	-2.2806	0.0100	-0.0100	0.0009	-
39 3_C5(4)	X	-3.0395	-3.0408	0.0100	-0.0100	0.0013	-
39 3_C5(5)	X	-3.7995	-3.8010	0.0100	-0.0100	0.0015	-
39 3_C5(6)	X	-4.5594	-4.5612	0.0100	-0.0100	0.0018	-
39 3_C5(7)	X	-5.3193	-5.3214	0.0100	-0.0100	0.0021	-
39 3_C5(8)	X	-6.0792	-6.0816	0.0100	-0.0100	0.0024	-
39 3_C5(9)	X	-6.8392	-6.8418	0.0100	-0.0100	0.0026	-
39 3_C5(10)	X	-7.5991	-7.6020	0.0100	-0.0100	0.0029	-
39 3_C5(11)	X	-8.3590	-8.3622	0.0100	-0.0100	0.0032	-
39 3_C5(12)	X	-9.1188	-9.1224	0.0100	-0.0100	0.0036	-
39 3_C5(13)	X	-9.8787	-9.8826	0.0100	-0.0100	0.0039	-
39 3_C5(14)	X	-10.6386	-10.6428	0.0100	-0.0100	0.0042	-
39 3_C5(15)	X	-11.3986	-11.4030	0.0100	-0.0100	0.0044	-
39 3_C5(16)	X	-12.1585	-12.1632	0.0100	-0.0100	0.0047	-
31g 3_C8	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
36e 3_B1	X	0.3051	0.3100	0.0300	-0.0300	-0.0049	-
40 3_B1	Y	0.3102	0.3100	0.0300	-0.0300	0.0002	-
31h 3_C8(1)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31h 3_C8(2)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31h 3_C8(3)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31h 3_C8(4)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31h 3_C8(5)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
36f 3_C8(1)	X	0.3057	0.3100	0.0300	-0.0300	-0.0043	-
36f 3_C8(2)	X	0.3063	0.3100	0.0300	-0.0300	-0.0037	-
36f 3_C8(3)	X	0.3070	0.3100	0.0300	-0.0300	-0.0030	-
36f 3_C8(4)	X	0.3076	0.3100	0.0300	-0.0300	-0.0024	-
36f 3_C8(5)	X	0.3080	0.3100	0.0300	-0.0300	-0.0019	-
41 3_B1(1)	Y	0.7504	0.7500	0.0100	-0.0100	0.0004	-
41 3_B1(2)	Y	1.5004	1.5000	0.0100	-0.0100	0.0004	-
41 3_B1(3)	Y	2.2503	2.2500	0.0100	-0.0100	0.0003	-
41 3_B1(4)	Y	3.0005	3.0000	0.0100	-0.0100	0.0005	-
41 3_B1(5)	Y	3.7505	3.7500	0.0100	-0.0100	0.0005	-
31i 3_C8	D	0.1286	0.1290	0.0100	-0.0100	-0.0004	-
36g 3_B1	X	0.3138	0.3100	0.0300	-0.0300	0.0038	-
42 3_C1	Y	0.7408	0.7420	0.0100	-0.0100	-0.0012	-
31j 3_C8	D	0.1286	0.1290	0.0100	-0.0100	-0.0004	-
36h 3_B1	X	0.3135	0.3100	0.0300	-0.0300	0.0035	-
43a 3_C1	Y	0.6239	0.6250	0.0100	-0.0100	-0.0011	-
31k 3_C8	D	0.1287	0.1290	0.0100	-0.0100	-0.0003	-



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
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Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other





Feature		ID	Actual	Nominal	pos Tol	neg Tol	Diff	<-- -->
36i	3_B1	X	0.3134	0.3100	0.0300	-0.0300	0.0034	-
43b	3_C1	Y	0.6240	0.6250	0.0100	-0.0100	-0.0010	-
31L	3_C8	D	0.1288	0.1290	0.0050	-0.0010	-0.0002	—
44a	3_B7	X	0.3156	0.3100	0.0300	-0.0300	0.0056	-
45	3_B6	Y	0.3798	0.3800	0.0300	-0.0300	-0.0002	-
31m	3_C8	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
46	3_B6	Y	2.1003	2.1000	0.0300	-0.0300	0.0003	-
44b	3_B7_R	Dist	0.3153	0.3100	0.0300	-0.0300	0.0053	-
31n	3_C8	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
47	3_B6	Y	2.8625	2.8600	0.0300	-0.0300	0.0025	-
44c	3_B7_R	Dist	0.3160	0.3100	0.0300	-0.0300	0.0060	-
31o	3_C8	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
48	3_B6	Y	4.3427	4.3400	0.0300	-0.0300	0.0027	-
44d	3_B7_R	Dist	0.3167	0.3100	0.0300	-0.0300	0.0067	-
31p	3_C8	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
49	3_B6	X	-3.5694	-3.5700	0.0300	-0.0300	0.0006	-
44f	3_B7	Y	0.3157	0.3100	0.0300	-0.0300	0.0057	-
31q	3_C8	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
50	3_B6	X	-4.0069	-4.0000	0.0300	-0.0300	-0.0069	-
44g	3_B7	Y	0.3125	0.3100	0.0300	-0.0300	0.0025	-
31r	3_C8(1)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31r	3_C8(2)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
51a	3_C5(1)	X	-0.9998	-1.0000	0.0300	-0.0300	0.0002	-
51a	3_C5(2)	X	-1.9998	-2.0000	0.0300	-0.0300	0.0002	-
44h	3_B7(1)	Y	0.3125	0.3100	0.0300	-0.0300	0.0025	-
44h	3_B7(2)	Y	0.3124	0.3100	0.0300	-0.0300	0.0024	-
31s	3_C8(1)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31s	3_C8(2)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31s	3_C8(3)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
51b	3_C5(1)	X	-0.9999	-1.0000	0.0300	-0.0300	0.0001	-
51b	3_C5(2)	X	-1.9999	-2.0000	0.0300	-0.0300	0.0001	-
51b	3_C5(3)	X	-2.9998	-3.0000	0.0300	-0.0300	0.0002	-
44i	3_B7(1)	Y	0.3124	0.3100	0.0300	-0.0300	0.0024	-
44i	3_B7(2)	Y	0.3125	0.3100	0.0300	-0.0300	0.0025	-
44i	3_B7(3)	Y	0.3126	0.3100	0.0300	-0.0300	0.0026	-
31t	3_C8	D	0.1287	0.1290	0.0300	-0.0300	-0.0003	-
53	3_A5	X	-12.9325	-12.9300	0.0300	-0.0300	-0.0025	-
44j	3_B7	CartDist	0.3105	0.3100	0.0300	-0.0300	0.0005	-
31u	3_C9(1)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31u	3_C9(2)	D	0.1289	0.1290	0.0050	-0.0010	-0.0001	—
31u	3_C9(3)	D	0.1287	0.1290	0.0050	-0.0010	-0.0003	—
31u	3_C9(4)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
31u	3_C9(5)	D	0.1286	0.1290	0.0050	-0.0010	-0.0004	—
54	3_B3(1)	X	-0.8751	-0.8750	0.0300	-0.0300	-0.0001	-
54	3_B3(2)	X	-1.7501	-1.7500	0.0300	-0.0300	-0.0001	-

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data												
Equip/Tooling												
Operator												
Material												
Setup												
Other												
Process												
Supplier												
Training												
Unapproved												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  _____ _____ _____		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____	





Feature	ID	Actual	Nominal	pos Tol	neg Tol	Diff	<-- -->
54	3_B3(3)	X	-2.6251	-2.6250	0.0300	-0.0300	-0.0001
54	3_B3(4)	X	-3.5002	-3.5000	0.0300	-0.0300	-0.0002
54	3_B3(5)	X	-4.3751	-4.3750	0.0300	-0.0300	-0.0001
44k	3_B7(1)	Y	0.3115	0.3100	0.0300	-0.0300	0.0015
44k	3_B7(2)	Y	0.3116	0.3100	0.0300	-0.0300	0.0016
44k	3_B7(3)	Y	0.3115	0.3100	0.0300	-0.0300	0.0015
44k	3_B7(4)	Y	0.3115	0.3100	0.0300	-0.0300	0.0015
44k	3_B7(5)	Y	0.3116	0.3100	0.0300	-0.0300	0.0016
31v	3_C8	D	0.1289	0.1290	0.0050	-0.0010	-0.0001
44m	3_B7	X	-0.3115	-0.3100	0.0300	-0.0300	-0.0015
55	3_B2	Y	0.4997	0.5000	0.0050	-0.0010	-0.0003
56a	4_A6	D	0.1953	0.1940	0.0050	-0.0010	0.0013
57	4_C3	Y	1.1294	1.1300	0.0300	-0.0300	-0.0006
58a	4_B3	X	0.3151	0.3100	0.0300	-0.0300	0.0051
59a1	4_A5	D	0.0986	0.0980	0.0040	-0.0010	0.0006
60a	4_A5	Y	-0.3441	-0.3440	0.0100	-0.0100	-0.0001
59a2	4_A5	D	0.0986	0.0980	0.0040	-0.0010	0.0006
61a	4_A5_Y	Dist	0.6875	0.6880	0.0100	-0.0100	-0.0005
56b	4_A6	D	0.1953	0.1940	0.0040	-0.0010	0.0013
58b1	4_B3_3d	Dist	0.3051	0.3100	0.0300	-0.0300	-0.0049
58b2	4_B3_3d	Dist	0.3048	0.3100	0.0300	-0.0300	-0.0052
62	4_C3	Y	3.7118	3.7100	0.0300	-0.0300	0.0018
59b1	4_A5	D	0.0986	0.0980	0.0040	-0.0010	0.0006
60b	4_A5	Y	-0.3440	-0.3440	0.0100	-0.0100	0.0000
59b2	4_A5	D	0.0986	0.0980	0.0040	-0.0010	0.0006
61b	4_A5_R	Dist	0.6876	0.6880	0.0100	-0.0100	-0.0004
56c	4_A6	D	0.1957	0.1940	0.0050	-0.0010	0.0017
58c	4_B3	Y	0.3165	0.3100	0.0300	-0.0300	0.0065
63	4_B3	X	-2.7528	-2.7500	0.0100	-0.0100	-0.0028
59c1	4_A5	D	0.0986	0.0980	0.0040	-0.0010	0.0006
60c	4_A5	X	-0.3439	-0.3440	0.0100	-0.0100	0.0001
59c2	4_A5	D	0.0986	0.0980	0.0040	-0.0010	0.0006
61c	4_A5_X	Dist	0.6880	0.6880	0.0100	-0.0100	0.0000
56d	4_A6	D	0.1953	0.1940	0.0050	-0.0010	0.0013
58d	4_B3	Y	0.3124	0.3100	0.0300	-0.0300	0.0024
64	4_B3	X	-7.0063	-7.0000	0.0100	-0.0100	-0.0063
59d1	4_A5	D	0.0985	0.0980	0.0040	-0.0010	0.0005
60d	4_A5	X	-0.3441	-0.3440	0.0100	-0.0100	-0.0001
59d2	4_A5	D	0.0986	0.0980	0.0040	-0.0010	0.0006
61d	4_A5_X	Dist	0.6878	0.6880	0.0100	-0.0100	-0.0002
56e	4_A6	D	0.1954	0.1940	0.0050	-0.0010	0.0014
58e	4_B3	Y	0.3128	0.3100	0.0300	-0.0300	0.0028
65	4_B4	X	-12.0060	-12.0000	0.0100	-0.0100	-0.0060
59e1	4_A5	D	0.0992	0.0980	0.0040	-0.0010	0.0012
60e	4_A5	X	-0.3487	-0.3440	0.0100	-0.0100	-0.0047



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  _____ _____ _____	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____

Feature	ID	Actual	Nominal	pos Tol	neg Tol	Diff	<- ->
59e2 4_A5	D	0.0990	0.0980	0.0040	-0.0010	0.0010	-
61e 4_A5_X	Dist	0.6975	0.6880	0.0100	-0.0100	0.0095	—
56f 4_A6	D	0.1954	0.1940	0.0050	-0.0010	0.0014	-
58f 4_B3	Y	1.3277	1.3100	0.0300	-0.0300	0.0177	—
66 4_B5	X	-17.0972	-17.0900	0.0100	-0.0100	-0.0072	—
59f1 4_A5	D	0.0985	0.0980	0.0040	-0.0010	0.0005	—
60f 4_A7	X	-0.3442	-0.3440	0.0100	-0.0100	-0.0002	-
59f2 4_A5	D	0.0985	0.0980	0.0040	-0.0010	0.0005	—
61f 4_A5_R	Dist	0.6880	0.6880	0.0100	-0.0100	0.0001	—

3 2/B6 (TYP WALL THICKNESS): .121-.127

62 2/A7 (FLANGE THICKNESS): .125-.133

63 2/A5 (FLANGE THICKNESS): .1235-.127

64 2/A6 (.19 RAD): .19 TYP.

65 2/E7 (.06 RAD): .06 TYP.

66 2/B7 (.16 RAD): .16 TYP.

67 2/D6 (8.00): O.K.

68 2/D3 (13.95): O.K.

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



# Receiving Report

Date: 12/8/2 Batch No: M122605  
 Supplier: MCDAUX COOTLE Dart P/O: 17508

Packing Slip: Yes ☒ No ☐ Release Note Attached: Yes ☒ No ☐ N/A ☐  
 Invoice: Yes ☒ No ☒ Waybill Attached: Yes ☒ No ☐ N/A ☐  
 Receipt: Cash ☐ Cr ☒ Shipment Complete: Yes ☒ No ☐ N/A ☐  
 QC6 Inspection 10/28/04 N/A ☒  
 Work Order 16 N/A ☒

Discrepancies

Part Number	Description	Quantity Ordered	Quantity Received	Quantity Returned	Quantity Short	Comments
M6061	2X8	24	10.92	0	13.08	

Initials of receiver (if shipment OK) Level 12 [Signature]

Production/Admin: 12/8/2 Location \_\_\_\_\_  
 Date \_\_\_\_\_  
 Received/Costing [Signature]  
 Initial [Signature]

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

### Purchase Order Receipt Listing

Page 1 of 1

Thursday, August 02, 2012 1:51:14 PM

All amounts are calculated in domestic currency.

All Vendors PO ID PO17508 Receipt Dates from 8/2/2012 to 8/2/2012 All Line Item Types

All Item ID/GL/WOs    All Rec. Employees    All Currencies

Grouped by Vendor ID

Purchase Order ID/ Curr Type	Line Nbr/ Insp Req	Project ID	Reference/ Description/ Cert Std	PO U/M / Stock U/M	Required Date Required Qty	Recv Date/ Recv Emp	Recv Qty (PO U/M)	Cost Per Unit/ Recv Value	Inspected Qty/ Rejected Qty (PO U/M)	MRB Qty/ MRB Reject Qty	Book Amt
VendorID/Vendor Name			VC-MET001	Metaux Castle							
PO17508	1		M6061T6B2.000X08. f 000		8/3/2012	8/2/2012	10.9200	\$39.73	0.0000	0	\$433.90
CAD	No		6061-T6 BAR 2.00' f X 8.00" 122605		24.0000	DESJ02		\$433.90	0.0000	0	
								Total Received Quantity:			10.9200
								Total Qty to Inspect (PO U/M):			0.0000
								Total Reject Quantity:			0.0000
								Total Receipt Value:			\$433.90
								Total Balance Due Quantity:			13.0800



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

**Castle Metals®**

A. M. Castle &amp; Co.

PACKING SLIP/  
CERTIFICATE OF CONFORMANCE

Page 1 of 1

Shipment No:1411668

<b>Ship From:</b> A. M. Castle & Co. (Canada) Inc. MONTREAL 835-SELKIRK AVENUE POINTE CLAIRE, QUEBEC H9R 3S2		<b>Sold To:</b> DART AEROSPACE LTD 1270 ABERDEEN HAWKESBURY, ON K6A 1K7 CA		<b>Ship To:</b> DART AEROSPACE LTD 1270 ABERDEEN HAWKESBURY, ON K6A 1K7 CAN		<b>Deliver To:</b> DART AEROSPACE LTD 1270 ABERDEEN HAWKESBURY, ON K6A 1K7 CA	
<b>Date Shipped</b> 01-AUG-2012	<b>F.O.B.</b> ORIGIN	<b>Freight Terms</b> Prepaid	<b>Carrier</b> MANITOULIN		<b>BOL No</b> 1411668-2		

<b>Shipment Details</b>				<b>Final Destination Branch - MON</b>			
<b>Order No</b> 2323110	<b>Line No</b> 1	<b>Item No</b> 23248	<b>Description</b> 2.0000.8.0000.RECT.6061.T6511.ALUMINUM.EXT.144.0000 SPECIFICATIONS: QQ-A-200/8				
<b>Purchase Order No</b> 17508		<b>Part Number</b>		<b>Ordered Qty</b> 21.00 FT		<b>Invoice Qty</b> 10.9167 FT	
<b>Details</b>							
<b>Delivery No.</b> 117819461	<b>Mill</b> KAISER ALUMINUM	<b>Heat Number</b> Z00052009	<b>Mech Id</b>	<b>PCS</b> 1	<b>Width (IN)</b>	<b>Length (IN)</b> 131.0000	<b>Shipped Qty(LBS)</b> 205.4080

These commodities/technologies are subject to US Export Administration & US State Dept. Regulations and, if intended for export, were/are exported thereunder. Diversion contrary to US Law is Prohibited.

We hereby certify the material covered by this certification conforms in accordance with the above specifications and has been found to meet the applicable requirements for the material, including any specifications forming a part of the description. Test reports are on file subject to examination. All claims for defective material are waived unless made in writing to A.M. Castle & Co. within 60 days of the shipment. Material cut to the correct size, or material cut by the customer cannot be returned for credit.

Reviewed by Authorized Castle Metals Representative:

Date:

Name:



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



Castle Metals FP

HEAT NUMBER Z00052009  
 MECHANICAL ID \_\_\_\_\_  
 ITEM CODE 23248  
 LOT NUMBER \_\_\_\_\_  
 PO NUMBER 106389  
 RECEIPT DATE 4-7-200  
 SUPPLIER KALSFER  
 SPECIFICATION \_\_\_\_\_  
 LCS NO  
 COMMENT \_\_\_\_\_  
 APPROVED PL

OK 12/08/04

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO17508

Purchase Order Date 7/20/12

PO Print Date 7/20/12

Page Number 1 of 1

Order From :

VC-MET001

METALUX CASTLE  
A.M. CASTLE & CO. (CANADA) INC. - BOX B9204 PO BOX 9100  
TORONTO, ON M4Y 3A5  
CA

Contact Name  
Vendor Phone 514 694 9575  
Vendor Fax 514 695 3281  
Vendor Account Nbr

Buyer Chantal Lavoie  
Requisition Nbr  
Tax Resale Nbr 10127-2607  
Terms Net 30  
Currency CAD  
FOB Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAKED**  
10/20/12

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	M6061T6B2.000X08.000	6061-T6 BAR 2.00" X 8.00"	8/03/12 Yes	24.00	Yours ppd	\$39.7900	\$954.96

Special Inst: MATERIAL: 6061-T6-  
T651/T6510/T6511/T62 ALUMINUM BAR  
SPEC: QQ-Q-225/8 OR AMS-QQ-A-225/8  
OR AMS4117/4128/4115/4116 OR QQ-A-  
200/8 OR AMS-QQ-A-200/8 OR AMS 4161  
OR ASTM B211 OR ASTM B221

PO Total:

\$954.96

**MATERIAL CERTIFICATION  
REQ'D UPON DELIVERY**

Change Nbr: 1

Change Date: 7/20/12

No substitution or deviation without  
consent.

Certificate of Conformity or Material  
Certification required - YES NO



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO18357

Purchase Order Date 11/07/12

PO Print Date 11/07/12

Page Number 1 of 1

Order From :

VC-WMP001

WEJAY MACHINE PRODUCTS CO. LTD  
600 O'CONNOR DRIVE  
KINGSTON, ONTARIO K7P 1N3  
CANADA

*attn: Scott*

Contact Name

Vendor Phone

613-384-1662

Vendor Fax

613-384-2997

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAXED**  
*11/16/12*

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	87960	D4500-1 BELL DOOR HEADER	11/23/12 Yes	4.00	FedEx PI collect	\$200.0000	\$800.00

Special Inst: MODIFY BELL DOOR HEADER  
RECESS AND COUNTERSINK

PO Total:

\$800.00

CERTIFICATE OF CONFORMITY  
REQ'D UPON DELIVERY

PO Instructions:

QUOTE # WJ-7001

Change Nbr:

2

Change Date: 11/07/12

No substitution or deviation without  
consent.

Certificate of Conformity or Material  
Certification required - YES NO



Packing Slip 36024

600 O'CONNOR DRIVE, KINGSTON, ONTARIO K7P 1N3  
TEL: 613-384-1662 FAX: 613-384-2997  
www.wejay.com

SOLD TO Dart Aerospace  
1270 Aberdeen Street  
Hawkesbury ON K6A 1K7

SHIP TO Dart Aerospace  
1270 Aberdeen Street  
Hawkesbury ON K6A 1K7

INVOICE DATE	YOUR ORDER NO. PO18357	DATE ORDERED 11/07/12	SHIPPED VIA Best way
CUSTOMER CODE DART	PROV. LIC. NO.	Extra <input type="checkbox"/> Exempt <input type="checkbox"/>	TERMS

QUANTITY ORDERED	B.O.	QUANTITY SHIPPED	DESCRIPTION	UNIT PRICE	AMOUNT
4	—	4	Modify bell door header as per drawing supplied Recess and countersink  NOTE: C of C required  Required by: November 23, 2012  <b>RELEASE NOTE</b> I certify that the items listed herein have been inspected and tested and conform to all specifications and requirements in the contract or purchase order. Inspection Supervisor <i>[Signature]</i> WMP 03 Nov. 19 2012		

ORDER: COMPLETE ☐  
PARTIAL ☐

**TOTAL**

RECEIVED BY \_\_\_\_\_  
.5% PER MONTH (18% PER ANNUM)  
CHARGED ON OVERDUE ACCOUNTS

NO GOODS RETURNED WITHOUT  
PRIOR AUTHORIZATION





600 O'CONNOR DRIVE, KINGSTON, ONTARIO K7P 1N3

PHONE: (613) 384-1662

FAX: (613) 384-2997

## CERTIFICATE OF COMPLIANCE

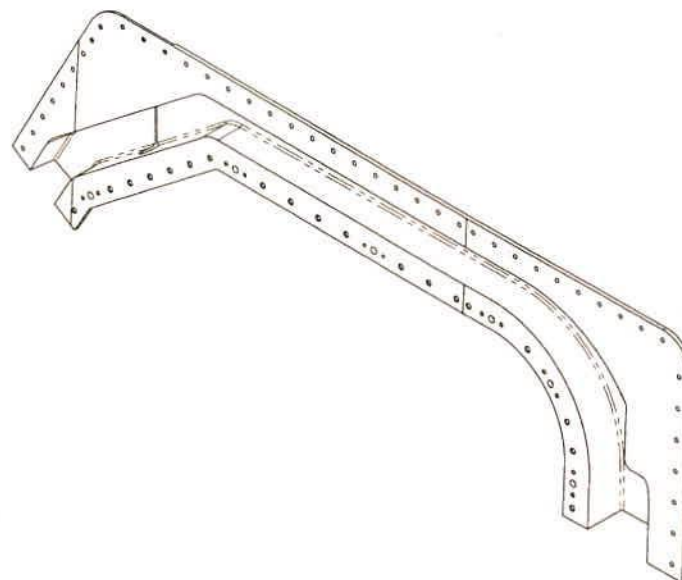
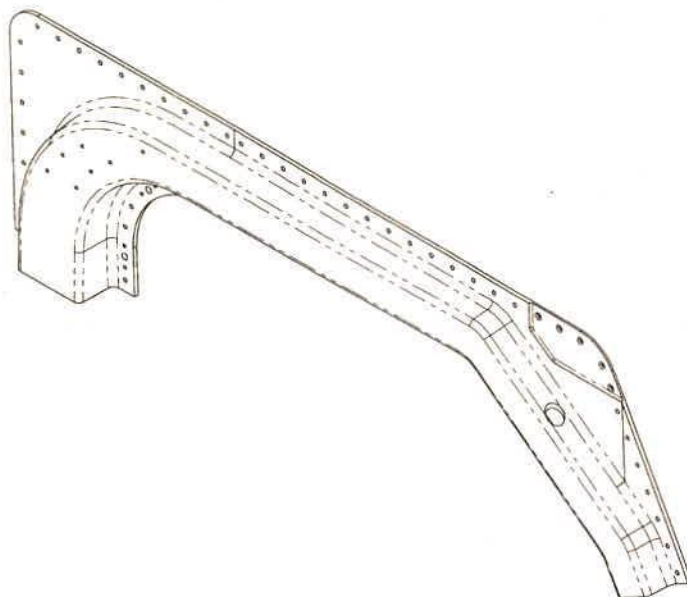
CUSTOMER: Dart Aerospace	DATE: Nov. 19, 2012		
	P.O.# PO18357		
	WEJAY JOB# 36024		
<p>I hereby certify that the following material has been inspected/tested and conforms to the requirements and specifications as stated in your contract and as noted below. Any exceptions will be listed as NCR items.</p>			
PART NO.	QTY.	PROCESS (ES)	SPECIFICATION / REV
D4500-1B 'Modified Bell Door Header'	4	Machined complete per drawing req'ts.	D4500-1B

Records of Inspection/Test will be retained for 5 years minimum.

Yours truly,

**Clifford Smith**

Authorized Q.A. Signatory



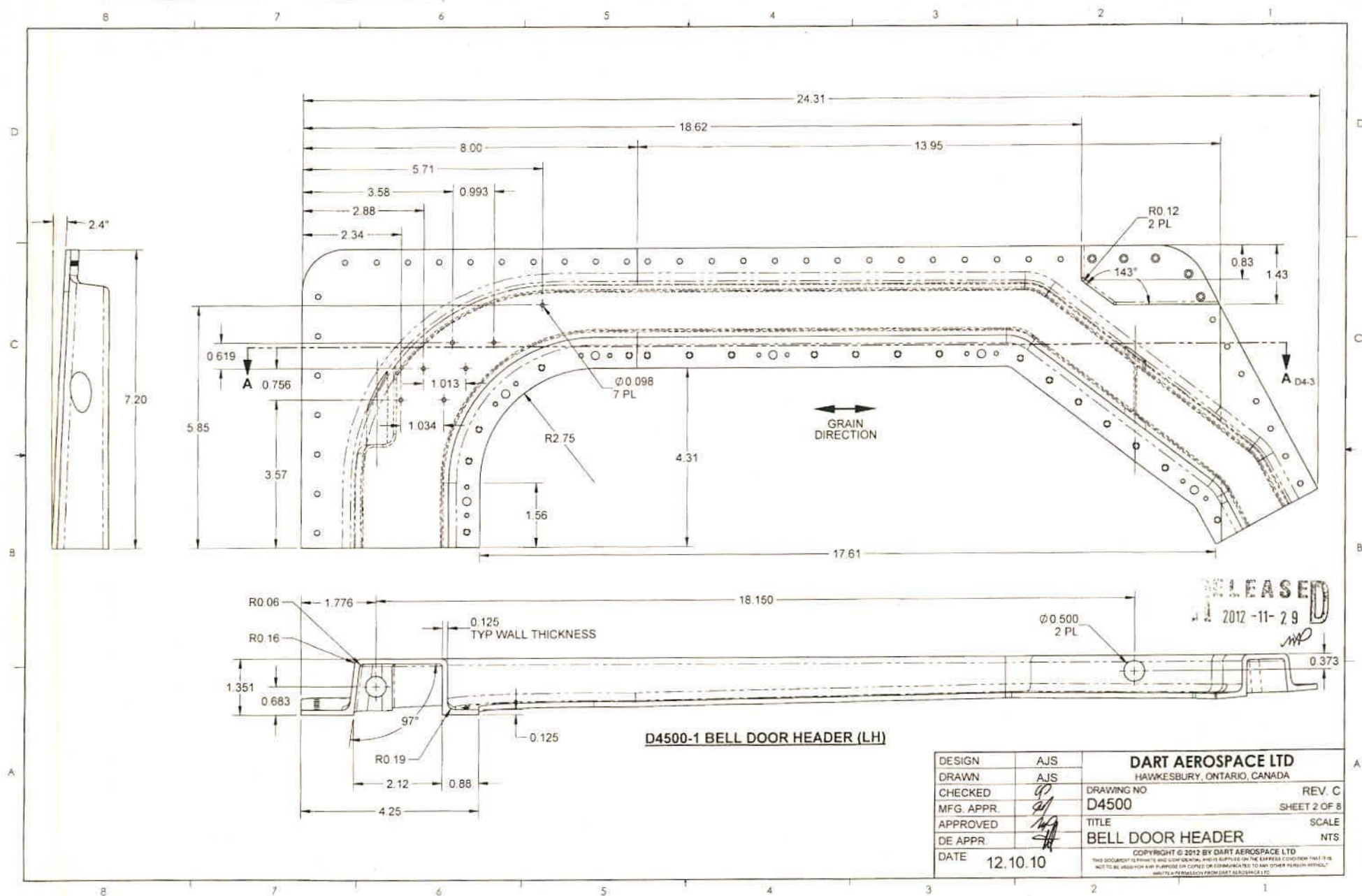
**D4500-1 BELL DOOR HEADER (LH)**

RELEASED  
2012-11-29  
MP

**NOTES:**

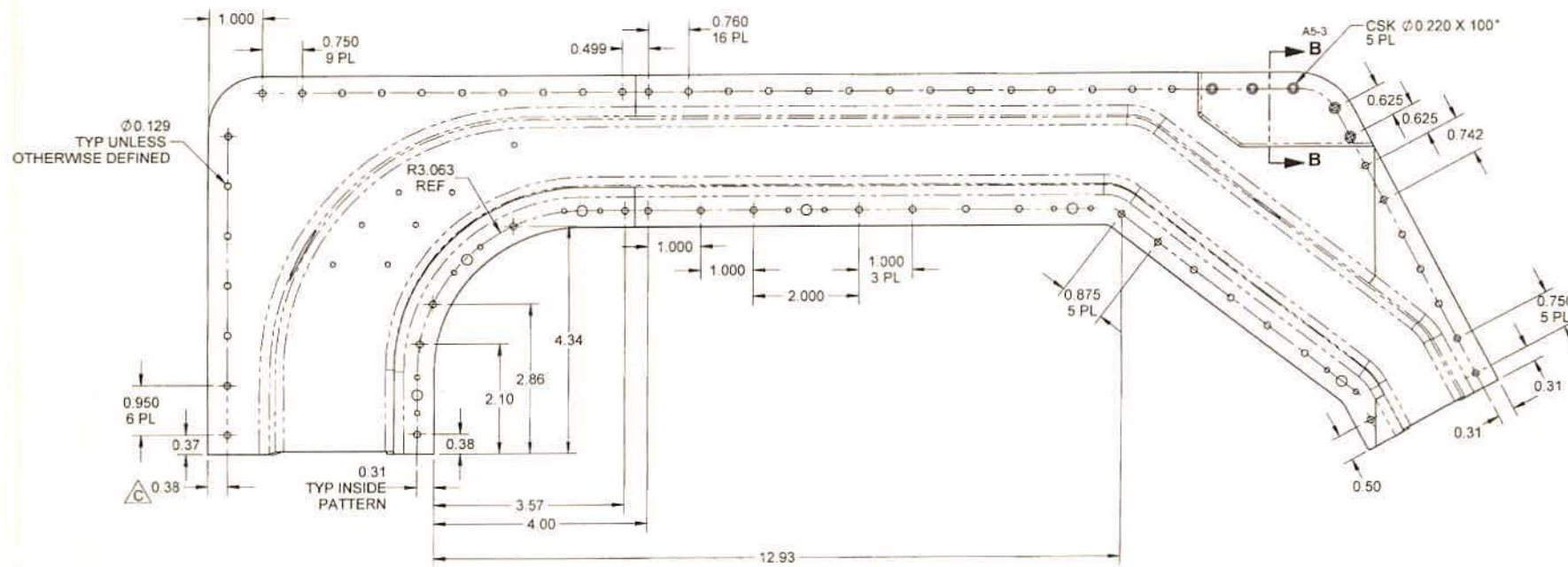
- 1) MATERIAL: 6061-T6/T651/T6510/T6511/T62 ALUMINUM BAR  
PER QQ-A-225/8 OR AMS-QQ-A-225/8  
(OR AMS 4117/4128/4115/4116)  
OR QQ-A-200/8 OR AMS-QQ-A-200/8 (OR AMS 4160)  
OR ASTM B211 OR ASTM B221  
REF DART SPEC M6061T6B
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME TEMPO GREY (4.2 1.3.2) PER DART QSI 005 4.2
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 1.81 lbs
- 8) RAW MATERIAL SURFACE FINISH SUFFICIENT FOR THIS PART  
(NOT NECESSARY TO FACE MATERIAL)
- 9) ALL NON DIMENSIONED FEATURES PER CAD FILE "D4500-1-REVC.STP"

C	ADDED -2 (RH CONFIGURATION) B8-3 0.38 DIM TYP OUTSIDE PATTERN NOTE DELETED (DRAFTING ERROR) C4-4 Ø0.129 THRU WAS Ø0.225 (DRAFTING ERROR) CSK WAS Ø0.170 SEE DETAIL C Ø0.201 HOLE WAS Ø0.194 (EXPANDED FOR FLOATING NUTPLATE)	AJS	12.10.10
B	COMPLETE REDESIGN	AJS	12.09.11
A	NEW ISSUE	AJS	12.03.02
REV	DESCRIPTION	BY	DATE
DESIGN	AJS	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED	JP	DRAWING NO.	REV. C
MFG. APPR.	JP	<b>D4500</b>	SHEET 1 OF 8
APPROVED	JP	TITLE	SCALE
DE APPR.	JP	<b>BELL DOOR HEADER</b>	NTS
DATE	12.10.10	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF DART AEROSPACE LTD	

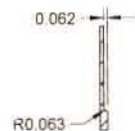




SECTION A-A C1-2  
THIS VIEW SHOWN FOR  
REFERENCE ONLY



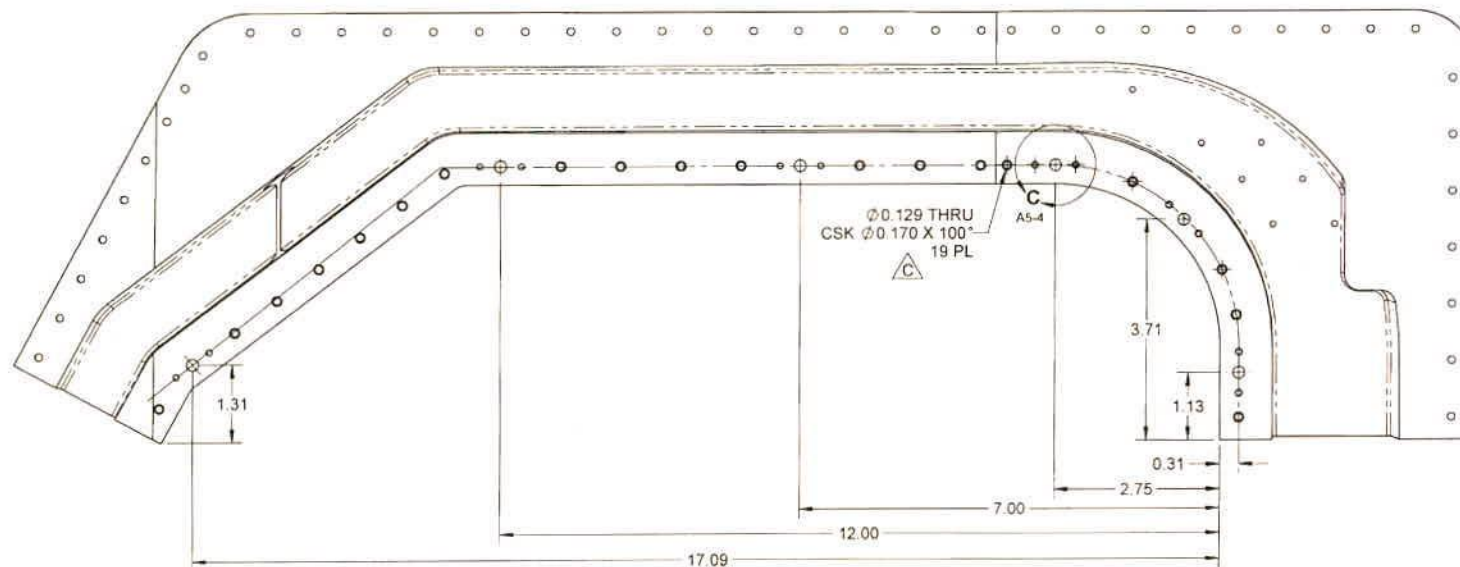
(SUPPLEMENTAL VIEW)



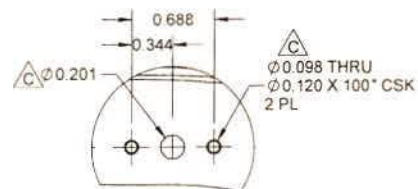
SECTION B-B C2-3

RELEASED  
2012-11-29

DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED	97	DRAWING NO.	REV. C
MFG. APPR.	21	D4500	SHEET 3 OF 8
APPROVED	148	TITLE	SCALE
DE APPR.		BELL DOOR HEADER	NTS
DATE	12.10.10	COPYRIGHT © 2012 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY FORM OR BY ANY MEANS WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



(SUPPLEMENTAL VIEW  
NUTPLATE LOCATIONS)



**DETAIL C** C3-4  
NUTPLATE HOLE DETAIL 6 PL  
SCALE 2X

**RELEASED**  
2012-11-29

DESIGN	AJS	<b>DART AEROSPACE LTD</b>	
DRAWN	AJS	HAWKESBURY, ONTARIO, CANADA	
CHECKED	g	DRAWING NO.	REV. C
MFG. APPR.	g	<b>D4500</b>	SHEET 4 OF 8
APPROVED	g	TITLE	SCALE
DE APPR.	g	<b>BELL DOOR HEADER</b>	NTS
DATE	12.10.10	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT DART AEROSPACE LTD'S WRITTEN PERMISSION</small>	